## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FAIR SHARE ACTION	C C00526673
Check if 24-hour report 48-hour report New report Amends report fi	led on MMM / DDD / YTYTY
Full Name of Payee FAIR SHARE, Inc.	Date of Public Distribution/Dissemination
	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 218 D Street SE, Suite 205	Amount
City State Zip Code	272.95
Washington DC 20003	Transaction ID : SE.5227  Date of Disbursement or Obligation
Purpose of Expenditure Reimbursement for staff time  Category/ Type  001	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Of	ffice Sought: House District:
Mark E Udall Oppose	President State: CO
Odichadi Todi To Bato	sbursement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Emily Fischer	11 01 2014
Mailing Address 429 E. 14th Ave.	Amount
Apt. J  City State Zip Code	510.00
Denver CO 80203	Transaction ID : SE.5221 Date of Disbursement or Obligation
Purpose of Expenditure Reimbursement for postage for mailing campaign materials to voters  Category/ Type  004	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ffice Sought: House District:
Mark E Udall Oppose	President Senate State: CO
	isbursement For: Primary General O14 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	782.95
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eignarty committee) any political party committee or its agent.	
GRACE M SMALL  [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FAIR SHARE ACTION	C C00526673
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Rising Tide Interactive	Date of Public Distribution/Dissemination
Mailing Address 901 New York Ave. NW	11 01 2014 Amount
#470	
City State Zip Code	34035.64
Washington DC 20001	Transaction ID : SE.5224  Date of Disbursement or Obligation
Purpose of Expenditure Online advertising  Category/ Type 004	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Name of Federal Candidate Support Office	ee Sought: House District:
CORY Cory GARDNER Oppose	President State: CO
Calendar Year-To-Date Per Election for Office Sought  Disk 2014	oursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Rising Tide Interactive	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 901 New York Ave. NW	Amount
#470	Amount
City State Zip Code	4492.81
Washington DC 20001	Transaction ID : SE.5225  Date of Disbursement or Obligation
Purpose of Expenditure Online advertising  Category/ Type  004	10 / 22 / 2014
Name of Federal Candidate Support Office	ce Sought: House District:
Mark E Udall Oppose	President State: CO
Calendar Year-To-Date Per Election for Office Sought  Dist 201	oursement For:  Primary  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	38528.45
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	39311.40
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
GRACE M SMALL  [Electronically Filed] Date	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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